PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09829508

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY			OTHER THAN		
TO	OTAL CLAIMS		30					RATE	FEE	1 1	RATE	FEE	
<u></u>	DR	*			AUTHOSE SYTON			BASIC FEE			BASIC FEE	710.00	
_			NUMBER FILED		NUMBER EXTRA			DAGIO FEE	333.00	ОН	DAGIO I CE	710.00	
TC	TAL CHARGE	ABLE CLAIMS	3○ minus 20=		io			X\$ 9=		OR	X\$18=	180	
IN	DEPENDENT C	LAIMS	3 m	inus 3 =	i)		X40=		OR	X80=		
MULTIPLE DEPENDENT CLAIM PRESENT					*			+135=		OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column						olumn 2		TOTAL		OR	TOTAL	890	
S/716/17 CLAIMS AS AMENDED - PART II							,		•	OTHER	THAN		
	(Column 1) (Column 2) (Column 3)						١.	SMALL	ENTITY	OR	SMALL	NTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 26	Minus	-3	4	= 8		X\$ 9=		OR	X\$18=		
	Independent	· 4	Minus	··· 4	<u> </u>	= 58	H	X40=		OR	X8 0=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM]	+135=		OR	+270=		
							ı	TOTAL		OR	TOTAL		
(Column 1) (Column 2) (Column 3)										NUUN. FEE I			
AMENDMENT B	n e de la seconda	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=	1 [X\$ 9=		OR	X\$1 8=		
ME	Independent	•	Minus	***		Ξ]	X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									On			
							L	+135=		OR	+270=		
TOTAL ADDIT. FEE								OR	TOTAL ADDIT. FEE				
		(Column 1)	-	(Colur		(Column 3)						İ	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIO NAL FEE	
	Total	•	Minus	••		=		X\$ 9=		OR	X\$18=		
	Independent	•	Minus	•••		=	lt	X40=			X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						┚┟			OR			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+270=			
**	If the "Highest Nu	mber Previously Pa	aid For IN THI	S SPACE I	s less tha	n 20, enter "20)." A	TOTAL DDIT. FEE		OR	TOTAL ADDIT, FEE		
""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													

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CLAIMS AS FILED - PART I									NTITY	OTHER THAN		
(Column 1) (Column 2)										OR	SMALL	ENTITY
TOTAL CLAIMS			30					RATE	FEE		RATE	FEE
FC)R		NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TC	TAL CHARGE	ABLE CLAIMS	30 minus 20=		· io		L	X\$ 9=		OR	X\$18=	180
	DEPENDENT C		3 minus 3 =		D			X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2						_	TOTAL		OR	TOTAL	890	
	C	LAIMS AS A	MENDE	- PAR	TII						OTHER	THAN
	er tras processes and stand	(Column 1)		(Colur	nn 2) (Column 3)			SMALL ENTITY			SMALL E	ENTITY
AMENDMENT A	u Na wy ni	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Š	Total	. 25	Minus	.3	0	=		X\$ 9=		OR	X\$18=	
AM	Independent FIRST PRESE	NTATION OF M	Minus	PENDENT	CLAIM	-		X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=	
								TOTAL		OR	TOTAL	
(Column 1) (Column 2) (Column 3)								DDIT. FEE L		, ,,	ADDIT. FEE	
		CLAIMS		HIGH		(Column 3)						
AMENDMENT B	e i Magazi	REMAINING AFTER AMENDMENT		PREVIO PAID I	USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Š	Total	. 26	Minus	. 3		=		X\$ 9=		OR	X\$18=	
AM	Independent FIRST PRESE	NTATION OF MI	Minus	··· 3	•	= /		X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=	
4/9/04						_	TOTAL		OR .	TOTAL		
	11 11 -1			34	- 22	Sec. 15	AD	DOIT. FEE L		٠.,	ADDIT. FEE	
		(Column 1) CLAIMS		(Colum		(Column 3)				_	0	
AMENDMENT C		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA			ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON NON	Total	. 34	Minus	. 3	0	= 4		X\$ 9=		OR	X\$18=	1200
AME	Independent	· if	Minus	*** (†	=	-	X40=			X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						\vdash			OR	7.00-	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										1		
** I	the "Highest Nur	nber Previously Pa	id For IN THIS	S SPACÉ is	less that	20. enter "20 "	ADI	TOTAL DIT. FEE		OR ,	TOTAL NDDIT, FEE	
""If the "Highest Number Previously Paid For" (Notal or Independent) is the highest number found in the appropriate box in column 1.												